lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A



DAMPAIGN DISCLOSURE BE

Des Moines, lows 50319 Fax: 515-281-4073		ONS, SEE BACK OF FORM E SUMMARY PAGE		2009 JAN 20 PM 3: 0	
COMMITTEE NAME (Must be	same as on Statement of Org	anization)			
Committee to Re-Elect Ster	_	,,	[FORM	
(1 \Statewide/Legislative/Judge 5	of committee you are reporting for Standing for Retention Candidate County Candidate (6)City Can y PAC (9)City PAC (10)School	: 5 (2)State PAC (3)State Party didate (7)School Board or Other Politic Board or Other Political Subdivision PA	:a) .C (DR-2 Rev. 07/2007) DISCLOSURE REPORT Or Office Use Only Comm. #	
CANDIDATE COMMITTEES Candidate Name Stephen Holmes	ONLY:	Political Party (if applicable) Democrat		ogged in Scanned Somputer OM	
Office Sought County Attorney		District (if Senate or House)		Audited	
BIGNATURE OF PERSON FILL I AM FILING A January 20, 2		515-220-440 TELEPHONE REPORT FOR (1) ELECTIO)	//RO/OP /DATE SIGNED -ELECTION YEAR.	
	port date)	Indicate b			
CHECK IF AMENDMENT TO	REPORT DATED	i thi sasaa waxaa ka	Local Cor	nmittees, enter Date of Election	
Chack if this is final (termina (You must continue to	ation) report and attach Notice office reports until a DR-3 is file		County &	oe: 5,2002 Lozal Committees, enter County in otton is held County	
STATEM	ENT OF CASH ON HAN	D share the appearance of the			
CASH ON HAND at the beginn committee. This amo of the last reporting p	unt MUST be the same as the	ctel of all funds held by the cash on hand at the end first report filed.)		249.24	
ADD TOTAL MONEY	TAKEN IN THIS PERIOD	g a way ya ka ka ka ka ka			
Schedule A: Cash Co	ontributions total (Attach Sche	dule A) (*also see in-kind below)		0.00	
		e F)		A AA	
Schedule H: Total Sa	ales of Campaign Property (At	ach Schedule H)	·	0.00	
(Schedule H	applies to Candidates' Com	ımittees Oniv) SUB-TOTAL	\$	249.24	
SUBTRACT TOTAL	MONEY SPENT THIS PERIO	D		0.00	
Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below)				0.00	
Schedule F: Loan Repayments total (Attach Schedule F)					
CASH ON HAND at the end of	this reporting period (if final re	port balance must be zero),	\$	249.24	
*UNPAID BILLS (Fram Sched	ule D - Attach Schedule D)	***************************************	\$		
IN KIND CONTRIBUTIONS (F	rom Schedule E - Attach Sch	sciule E),,,,,,,	\$		
OUTSTANDING LOANS (Fro	om Schedule F - Attach Sched	ule F)	\$	26,750.00	
CONSULTANT BREAKDOWN	(Schedule G Attached?)		_	YES VNO	
CANDIDATE COMMITTEES O	NLY:				
VALUE OF CAMPAIGN PROP	ERTY (From Schedule H - Att	ach Schedule H)	\$		

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FAX No. 515 220 4402

		FIRESE	SCHEDULE	
imittee name(must	be same as on Statement of Organization)		F (25, p2/ps)	LOAN
nmittee to Re-Elect	·		(Rev. 02/08)	RECEIV 8 REPA
	rts money loaned to the committee which is deposited in t ROM <u>LAST</u> REPORTING PERIOD \$ 26,750.00	he committee account.	CHECK T AMENDIN	
TI- MONETARY LO	ANS RECEIVED THIS REPORTING PERIOD of loan, such as a bank, must be shown if a third party is in	nvolved. Include loans from	candidate's personal fi	ınds.)
DATE RECEIVED	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIF CANDIDATE (If App	TO AMOUNT C	IF LOAN
(MM/DD/YR)		-		
ŀ				
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		TOTAL (PART I)	•	
		10 may may	*	
(Loans forgiver	OAN REPAYMENTS MADE THIS REPORTING FERIOD IT MUST be reported on Schedule E In-kind Contributions.) 	TO J. AMOUNT	REPAID
RT II - MONETARY L (Loans forgiver DATE PAID (MM/DD/YR)	OAN REPAYMENTS MADE <u>THIS</u> REPORTING PERIOD I must be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	,	plicable)	REPAID
(Loans forgiver	must be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER) RELATIONSHIP		REFAID
(Loans forgiver	must be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER) RELATIONSHIP	plicable)	REPAID
(Loans forgiver	must be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER) RELATIONSHIP	plicable)	REPAID
(Loans forgiver	must be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER) RELATIONSHIP	plicable)	REPAID
(Loans forgiver	must be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER) RELATIONSHIP	plicable)	REPAID
(Loans forgiver	nmust be reported on Schedule E In-kind Contributions. NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)) RELATIONSHIP	plianble) \$	REPAID
(Loans forgiver	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIF CANDIDATE* (If Ap	plicable) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
(Loans forgiver	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP CANDIDATE* (IF AP I REPAYMENTS (PART II)	\$ \$ 26,750.0	
DATE PAID (MM/DD/YR) Disclosure law requires aking a contribution to present the present that the present the present that the present the present that the present the present the present that the present the present the present the present the present the pre	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) TOTAL CASI	RELATIONSHIP CANDIDATE* (If Ap I REPAYMENTS (PART II) TAL LOANS FORGIVEN END OF REPORT PERIOD relative tegree of contributor is	\$ \$ 26,750.0	0